



**LUNCH CANCELLATION NOTICE**

**FOR GROUPS OR CLASSES WHO WILL NOT BE EATING AT THE SCHOOL CAMPUS  
CAFETERIA**

**SCHOOL** \_\_\_\_\_ **DATE** \_\_\_\_\_  
\_\_\_\_\_ **STUDENTS WILL NOT HAVE LUNCH AT THE CAFETERIA ON** \_\_\_\_\_  
**NO.** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PLEASE DEDUCT FROM LUNCH COUNT.**                      **GRADE** \_\_\_\_\_

\_\_\_\_\_  
**TEACHER'S SIGNATURE**

\_\_\_\_\_  
**PRINCIPAL'S SIGNATURE**

*\*\*\*This notice must be turned in to the campus cafeteria manager at least 3 days in advance\*\*\**